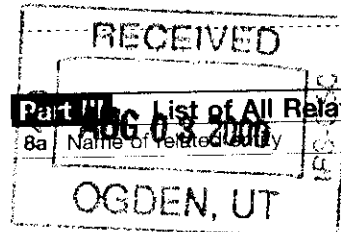


**Part I General Information**

1 Name of organization <b>issues Committee of Local One</b>		Employer identification number <b>94 1333179</b>
2 Mailing address (P.O. Box or number, street, and room or suite number) <b>P.O. Box 222</b>		
City or town, state, and ZIP code <b>Martinez, CA 94553</b>		
3 E-mail address of organization <b>cegbert@peu1.org</b>		
4a Name of custodian of records  <b>Charles R. Egbert</b>	4b Custodian's address <b>5034 Blum Road</b> <b>Martinez, CA 94553</b>	
5a Name of contact person  <b>Charles R. Egbert</b>	5b Contact person's address <b>5034 Blum Road</b> <b>Martinez, CA 94553</b>	
6 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number <b>5034 Blum Road</b>		
City or town, state, and ZIP code <b>Martinez, CA 94553</b>		

**Part II Purpose**

7 Describe the purpose of the organization  
**employee representation in public sector**



Part III List of All Related Entities (see instructions)		
8a Name of related entity	8b Relationship	8c Address
<b>OGDEN, UT</b>		

10

Part IV

List of All Officers, Directors, and Highly Compensated Employees (see instructions)

9a Name	9b Title	9c Address
Jacque Salvador	President	5034 Blum Road Martinez, CA 94553
Carroll Phillips	First Vice-President	5034 Blum Road
Carl Doolittle	Swecond Vice President	5034 Blum Road
Penny Williams	Secretary	5034 Blum Road
Michael Angelo Silva	Treasurer	5034 Blum Road
James Emerson	Sargent at Arms	5034 Blum Road
Mary Ann Duncan	City Representative	5034 Blum Road
Ron Russell	County Representative	5034 Blum Road
Mike Slade	Schools Represenative	5034 Blum Road
Dave Rolley	Special District Represe	5034 Blum Road
Charles Egbert	General Manager	5034 Blum Road
Sandra Falk	Assistant General Mana	

Under penalties of perjury, I declare that the organization named in Part I is to be treated as an organization described in section 527 of the Internal Revenue Code, and that I have examined this notice, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Sign  
Here

Signature of authorized official

Date

**Part IV** List of All Officers, Directors, and Highly Compensated Employees (see instructions)

[illegible]

Under penalties of perjury, I declare that the organization named in Part I is to be treated as an organization described in section 527 of the Internal Revenue Code, and that I have examined this notice, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

**Sign  
Here**

Signature of authorized official

Date:



**Printed on recycled paper**